

**POLITICAL INQUIRY RECORD:  
FEDERAL, STATE & LOCAL CANDIDATE ADS  
ALL QUESTIONS MUST BE ANSWERED**

**Federal Candidate**

**State or Local Candidate**

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- 1. Requested by (Agency name, address, phone number & contact):**

**Agency Name**

**Contact**

**Phone Number**

**Address**

- 2. On behalf of (Candidate name & authorized campaign committee name):**

- 3. Election (Office sought & date):**

- 4. Date of request:**

- 5. Request received by:**

- 6. Details:**

- 7. Name, Address & Phone Number of contact person for the candidate or candidate's authorized campaign committee:**

**Contact Name**

**Phone Number**

**Address**



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8. Name of treasurer of authorized committee:

9. Date and nature of follow-ups, if any:

10. Disposition:

Accepted – see contract details

Rejected – provide reason:

Additional Information: